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OMB 0651-0032 PTO/SB/05 (12/97) ion Act of 1995, no persons are

UTILITY PATENT APPLICATION TRANSMITTAL

(Only for new nonprovisional applications under 37 CFR 1.53(b))

Attorney Docket No.

DOT1360/TI-31692

First Named Inventor or Application Identifier N. Almassy

Telephone Network

System and Method for the Exchange of Location Information in

Express Mail Label No. EL213565148US Assistant Commissioner for Patents APPLICATION ELEMENTS ADDRESS TO: Box Patent Application Washington, DC 20231 See MPEP Chapter 600 concerning utility patent application contents Fee Transmittal Form (e.g., PTO/SB/17) Microfiche Computer Program (Appendix) 6. (Submit an original, and a duplicate for fee processing) Specification Nucleotide and/or Amino Acid Sequence Submission [Total Pages 33 Х 2. 7. (preferred arrangement set forth below) (if applicable, all necessary) - Descriptive title of the Invention Computer Readable Copy - Cross References to Related Applications - Statement Regarding Fed sponsored R&D b. Paper Copy (identical to computer copy) - Reference to Microfiche Appendix - Background of the Invention Statement verifying identical of above copies C. - Brief Summary of the Invention - Brief Description of the Drawings (if filed) **ACCOMPANYING APPLICATION PARTS** - Detailed Description - Claim(s) 8. Assignment Papers (cover sheet & Documents(s)) - Abstract of the Disclosure 37 CFR §3.73(b) Statement Power of X 6 3. Drawing(s) (35 USC d113) [Total Sheets 9. (when there is an assignee) Attorney Oath or Declaration [Total Pages 10. English Translation Document (if applicable) Copies of IDS Information Disclosure X Newly Executed (original or copy) 11. Statement (IDS)/PTO-1449 Citations a. Copy from a prior application (37 CFR §1.63(d)) b. 12. Preliminary Amendment (for continuation/divisional with Box 17 completed) [Note Box 5 below] 2 Return Receipt Postcards(MPEP 503) X 13. (Should be specifically itemized) Small Entity Statement filed in prior DELETION OF INVENTOR(S) i. 14. Signed statement attached deleting inventor(s) Statement(s) application Status still proper and desired named in the prior application, (PTO/SB/09-12) see 37 CFR §1.63(d)(2) and 1.33(b). Certified Copy of Priority Document(s) 15. if foreign priority is claimed) Incorporation By Reference (useable if Box 4b is checked) 5. Check #455173 for \$1578.00 X 16. The entire disclosure of the prior application, from which a copy of the oath or declaration is supplied under Box 4b, is considered as being part of the disclosure of the accompanying application and is hereby incorporated by reference therein. A new statement is required to be entitled to pay small entity fees, except where one has been filed in a prior application and is being relied upon 17. If a CONTINUING APPLICATION, check appropriate box and supply the requisite information below and in a preliminary amendment: □ Continuation □ Divisional Continuation-in-part (CIP) of prior application No: Prior application information: Examiner Group / Art Unit: 18. CORRESPONDENCE ADDRESS Customer Number or Bar Code Label Correspondence address below (Insert Customer No. or Attach bar code label here) NAME Ronald O. Neerings **Texas Instruments Incorporated ADDRESS** Mail Station 3999 P. O. Box 655474 CITY **Dallas** STATE ZIP CODE 75265 TX COUNTRY U.S.A. TELEPHONE (972) 917-FAX (972) 917-4418 Registration No. (Attorney/Agent) Name (Print/Type) Terrance A. Meador 30,298 Date Signature

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FEE TRANSMITTAL

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TOTAL AMOUNT OF PAYMENT

Patent fees are subject to annual revision on October 1. These are the fees effective October 1, 1997
Small Entity payments <u>must</u> be supported by a small entity statement, otherwise large entity fees must be paid. See Forms PTO/SB/09-12.

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Complete If Known				
Application Number	To be assigned			
Filing Date	Herewith			
First Named Inventor	Nikolaus Almassy			
Examiner Name	Unknown			
Group / Art Unit	Unknown			
Attorney Docket No.	TI-31692P/DOT1360			

METHOD OF PAYMENT					FEE (CALCULATI	ON (continued)	
The Commissioner is hereby authorized to charge to the follow Deposit Account,	/ing	3.	ADDIT	ONAL	FEES			
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Charge any additional fee required or credit any overpayment Charge all indicated fees and any additional fee required or credit any overpayment		139	130	139	130	Non-English s	pecification	
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2. EXTRA CLAIM FEES		43	450	243	225	Design issue for		
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SUBMITTED BY			,				Reg. Number	
yped or Printed Name TERRANCE A. MEADOR 30,298			30,298					
Signature Tunomee A. A	NO	Rd			e e	m 5000	Deposit Account Oser ID	

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